

CLAIMS ONLY							
Application Number <u>09/987930</u>						Filing Date	
Applicant(s)							
May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
1	X						
2	X						
3	X						
4	X						
5	X						
6	X						
7	X						
8	X						
9	X						
10	X						
11	X						
12	X						
13	X						
14	X						
15	X						
16	X						
17	X						
18	X						
19	X						
20	X						
21	X						
22	X						
23	X						
24	X						
25	X						
26	X						
27	X						
28	X						
29	X						
30	X						
31	X						
32	X						
33	X						
34	X						
35	X						
36	X						
37	X						
38	X						
39	X						
40	X						
41	X						
42	X						
43	X						
44	X						
45	X						
46	X						
47	X						
48	X						
49	X						
50	X						
Total Indep							
Total Depend							
Total Claims							

Filing Date

Applicant(s)

\* May be used for additional claims or amendments